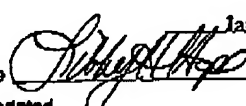



NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) 42390P12249
I hereby certify that this correspondence is being transmitted via facsimile on the date shown below to the United States Patent and Trademark Office. January 6, 2006 Signature  Typed or printed name <u>Libby H. Hope</u>		In re Application of Linden Minnick, et al. Application Number 10/007,082 Filed 12/06/2001 For METHOD AND APPARATUS FOR PROCESSING Art Unit 2151 Examiner Madamba, G.
Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.		
The fee for this Notice of Appeal is (37 CFR 1.17(b))		\$500.00
<input type="checkbox"/> Applicant claims small entity status under 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is:		
<input type="checkbox"/> A check in the amount of the fee is enclosed.		
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.		
<input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.		
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 50-0221 I have enclosed a duplicate copy of this sheet.		
<input type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.		
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2039.		
I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) <input checked="" type="checkbox"/> attorney or agent of record. <input type="checkbox"/> attorney or agent acting under 37 CFR 1.34(a). <small>Registration number if acting under 37 CFR 1.34(a)</small>		 Signature <u>Libby H. Hope, Reg. No. 46,774</u> Typed or printed name 1-6-06 Date
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.		
<input type="checkbox"/> *Total of _____ forms are submitted.		

Based on PTO/SB/31 (04-05) as modified by Bigsby, Spickoff, Taylor & Zeffman (w/4) 11/30/2005.
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01/09/2006 EAYALEW1 00000034 500221 10007082

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JAN 06 2006

BLAKELY SOKOLOFF TAYLOR & ZAFMAN LLP

TELEPHONE: (303) 740-1980

INTELLECTUAL PROPERTY LAW
12400 WULSHIRE BOULEVARD, 7TH FLOOR
LOS ANGELES, CA 90025

FACSIMILE: (303) 740-6962

FACSIMILE COVER SHEET

Deliver to: Madamba, G., USPTO Art Group: 2151
 Facsimile No.: (571) 273-8300 Date: January 6, 2006
 From: Libby H. Hope, Reg. No. 46,774
 Our Docket No.: 42390P12249 Number of pages 5 including this sheet.
 Application No.: 10/007,082 Filing Date: 12/6/2001
 Docket Due Date(s): 12/7/2005 1/7/2006

Enclosed are the following documents:

- | | |
|--|---|
| <input type="checkbox"/> Amendment: _____ (____ pgs) | <input type="checkbox"/> Issue Fee Transmittal |
| <input type="checkbox"/> Appeal Brief (____ pgs) | <input checked="" type="checkbox"/> Notice of Appeal |
| <input type="checkbox"/> Application: _____
(____ pgs) w/cover & abstract) | <input type="checkbox"/> Petition for: _____ |
| <input type="checkbox"/> Assignment & Cover Sheet (____ pgs) | <input type="checkbox"/> Request for Continued Examination (RCE) |
| <input checked="" type="checkbox"/> Certificate of Facsimile _____ | <input type="checkbox"/> Reply Brief (____ pgs) |
| <input type="checkbox"/> Continued Prosecution Application (CPA) | <input type="checkbox"/> Request & Certification Under 35 USC 122(b)(2)(B)(i) |
| <input type="checkbox"/> Declaration & POA (____ pgs) | <input type="checkbox"/> Request to Rescind Previous Nonpublication Request |
| <input type="checkbox"/> Drawings: ____ sheets, ____ figures | <input type="checkbox"/> Response to Notice of Missing Parts & Formalities Letter |
| <input type="checkbox"/> Extension of Time: _____ | <input type="checkbox"/> Response to Written Opinion (____ pgs) |
| <input checked="" type="checkbox"/> Fee Transmittal (In duplicate) | <input type="checkbox"/> Terminal Disclaimer |
| <input type="checkbox"/> IDS & PTO/SB/08 (____ pgs) | <input type="checkbox"/> Transmittal of Publication Fee Due |
| <input type="checkbox"/> Other _____ | <input checked="" type="checkbox"/> Transmittal Letter |

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8A)

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 Libby H. Hope

1/6/2006

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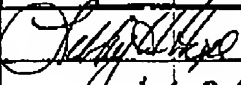
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application No.	10/007,082	
	Filing Date	December 6, 2001	
	First Named Inventor	Linden Minnick	
	Art Unit	2151	
	Examiner Name	Madamba, G.	
Total Number of Pages in This Submission	4	Attorney Docket Number	42390P12249

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; height: 50px;">Certificate of Facsimile</div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Libby H. Hope, Reg. No. 46,774 Intel Corporation
Signature	
Date	1-6-06

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Typed or printed name	Libby H. Hope	Date	1-6-06
Signature		Date	1-6-06

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JAN 06 2006

FEE TRANSMITTAL for FY 2005 <small>Patent fees are subject to annual revision.</small>		Complete if Known		
		Application Number	10/007,082	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		Filing Date	December 6, 2001	
		First Named Inventor	Linden Minnick	
		Examiner Name	Madamba, G.	
TOTAL AMOUNT OF PAYMENT (\$)		500.00	Attorney Docket No.	42390P12249

METHOD OF PAYMENT (check all that apply)

- ☐ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify): _____
- ☒ Deposit Account Deposit Account Number: 50-0221 Deposit Account Name: Intel Corporation
- For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
- ☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
- ☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. ☒ Credit any overpayments

FEE CALCULATION**1. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
26	26	0	\$0.00
Independent Claims	3	200.00	\$0.00
Multiple Dependent			
Large Entity	Small Entity		
Fee Code (\$)	Fee Code (\$)	Fee Description	
1202 80	2202 25	Claims in excess of 20	
1201 200	2201 100	Independent claims in excess of 3	
1203 500	2203 180	Multiple Dependent claims, if not paid	
1204 300	2204 150	Rescued independent claims over original patent	
1205 900	2205 150	Rescued claims in excess of 20 and over original patent	
SUBTOTAL (1)			(5) 0.00

*or number previously paid, if greater. For Rescues, see below

2. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)		
1051 120	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
2053 130	2053 130	Non-English specification	
1251 120	2251 60	Extension for reply within first month	
1252 450	2252 225	Extension for reply within second month	
1253 1,020	2253 510	Extension for reply within third month	
1254 1,360	2254 795	Extension for reply within fourth month	
1255 2,160	2255 1,080	Extension for reply within fifth month	
1401 300	2401 250	Notice of Appeal	
1402 800	2402 250	Filing a brief in support of an appeal	
1403 1,000	2403 800	Request for oral hearing	
1451 1,510	2451 1,510	Petition to institute a public use proceeding	
1480 120	2480 130	Petitions to the Commissioner	
1807 50	1807 60	Processing fee under 37 CFR 1.17(e)	
1808 180	1808 180	Submission of Information Disclosure Sheet	
1809 780	1809 385	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810 780	2810 385	For each additional invention to be examined (37 CFR § 1.129(b))	
Other fee (specify):			
SUBTOTAL (2)			(6) 500.00

SUBMITTED BY

Name (print/type)	Libby H. Hope	Registration No. (Attorney/Agent)	46,774	Telephone	(949) 498-0601
Signature		Date	1-6-06		

Based on PTO/SB-17 (12-04) as modified by Boley, Scholoff, Taylor & Zelman (wtr) 12/15/2004.
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